

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	RW	32	7/9
FORMALITY REVIEW	L.I.	1106	8/31/01
RESPONSE FORMALITY REVIEW	112	5C906	11/20/01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 -+ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
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30	
33	
5	
02	
03	
03	
1	✓
2	✓
3	N
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28	
29	
30	N
31	✓
32	✓
33	N
34	
35	
36	
37	✓
38	✓
39	
40	N
41	✓
42	N
43	N
44	N
45	✓
46	N
47	N
48	N
49	
50	

Claim	Date
Final	
Original	
4	
5	
03	
51	N
52	N
53	✓
54	N
55	N
56	N
57	✓
58	✓
59	✓
60	N
61	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here